

AD _____

Award Number: W81XWH-FE-FE-J

TITLE: $\hat{O}[\{ \} | \wedge \{ \wedge \} \text{ca}] \hat{A} \cdot \hat{A} \wedge | [\hat{a} \cdot] | \text{ca} \hat{A} \wedge \{ \} \hat{a} | [\{ \wedge \hat{O} | [\} \wedge \cdot \hat{A} \text{ca} \} \text{ca} \cdot \hat{A}$
 $\hat{O}c | \wedge \cdot \hat{a} \} \hat{A} \hat{a} | \text{ca} \cdot$

PRINCIPAL INVESTIGATOR: $\hat{O} \hat{a} \hat{a} | \hat{A} \hat{a} \} \wedge |$

CONTRACTING ORGANIZATION: $V @ \hat{A} \hat{O} | \wedge \hat{c} \wedge | \hat{a} \hat{a} \hat{O} | \hat{a} \hat{a}$
 $\hat{O} | \wedge \hat{c} \wedge | \hat{a} \hat{a} \hat{U} P \hat{A} | F \hat{J} \hat{I} \hat{A}$

REPORT DATE: Jul 1966

TYPE OF REPORT: Annual

PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: Approved for public release; distribution unlimited

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.

REPORT DOCUMENTATION PAGE				Form Approved OMB No. 0704-0188	
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.					
1. REPORT DATE (DD-MM-YYYY) 01-07-2011		2. REPORT TYPE Annual		3. DATES COVERED (From - To) 1 JUL 2010 - 30 JUN 2011	
4. TITLE AND SUBTITLE Complementation of Myelodysplastic Syndrome Clones with Lentivirus Expression Libraries				5a. CONTRACT NUMBER	
				5b. GRANT NUMBER W81XWH-10-1-0379	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S) Daniel Lindner E-Mail: lindned@ccf.org				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) The Cleveland Clinic Cleveland, OH 44195				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited					
13. SUPPLEMENTARY NOTES					
14. ABSTRACT We have successfully prepared sense expression libraries, characterized the size of their inserts which are fused to a green fluorescent protein tag, and packaged these libraries into lentivirus. Four different human MDS bone marrow isolates have been transfected with lentivirus at multiplicity of infection of 0.1. A collection of 250 puromycin clones were isolated, genomic DNA was prepared, and clones were screened for ability to undergo myeloid differentiation in response to GM-CSF. Only ~30% of the puromycin resistant clones (80) acquired this phenotype. Transfection of MDS cells with antisense libraries did not generate any clones that acquired the desired (differentiative) phenotype. PCR was used to identify presence of the trans gene in the 80 clones. DNA sequencing is currently being performed to identify the inserts. Lentivirus is being prepared to express these inserts in naïve MDS cell pools. This validation will ensure that the insert causes the desired phenotype.					
15. SUBJECT TERMS Myelodysplastic syndrome, lentivirus, cDNA libraries, complementation					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT UU	18. NUMBER OF PAGES 8	19a. NAME OF RESPONSIBLE PERSON USAMRMC
a. REPORT U	b. ABSTRACT U	c. THIS PAGE U			19b. TELEPHONE NUMBER (include area code)

Table of Contents

	<u>Page</u>
Introduction.....	4
Body.....	4-6
Key Research Accomplishments.....	7
Reportable Outcomes.....	7
Conclusion.....	7
References.....	8

Introduction

Rationale: The focus of our proposal is the identification of normal human genes, that when overexpressed by transduction of a lentiviral vector, complement the underlying genetic defect in MDS cells. Our alternate approach was to downregulate gene expression using shRNA libraries, and identify genes whose overexpression promote the MDS phenotype. Our ultimate endpoint is the detection of terminal differentiation and colony formation resulting in normal myeloid cells.

Hypothesis: Expression of a normal human cDNA library in MDS cells will correct the aberrant phenotype and permit normal proliferation and myeloid differentiation in selected clones.

Body

In this study we test the assumption that over-expression of a wild type gene, or suppression of an abnormally expressed gene by shRNA, in a transfected MDS clone will interrupt the pathogenic signaling that gives rise to the MDS phenotype. Therefore, the transfected gene will permit normal differentiation of the MDS cell into a normal myeloid lineage. The first objective (months 1 – 6 in SOW) was to prepare and characterize the lentivirus libraries.

Fig. 1. Construction of human liver cDNA expression library.

Library contains $\sim 7 \times 10^7$ individual clones, and the average insert size is >2 kb. Lane 1: marker, size indicated in kb; Lane 2: linearized plasmid; Lane 3: plasmid and ligated insert; Lane 4: human liver cDNA insert prior to ligation.

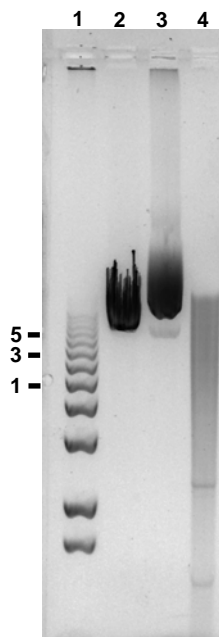
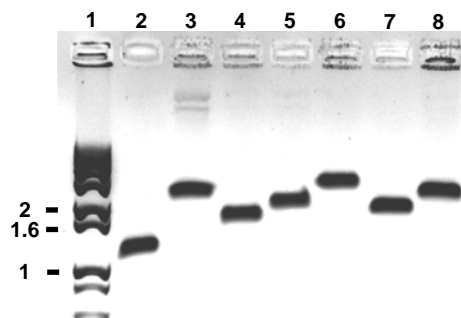


Fig. 2. Characterization of lentivirus cDNA expression library.

Following packaging and titering of the lentivirus preparation, 293T cells were infected with library at multiplicity of infection of 0.1 and selected with puromycin x 1 wk. Individual surviving clones were expanded over 10 days and screened by PCR using LTR-specific primers. Lane 1: marker, size indicated in kb; Lanes 2 - 8: PCR product from individual clones.



Our next goal was to transfect human MDS cells with lentivirus, select for survivors with puromycin, and test for expression of cDNAs contained in the library. Surviving colonies were dissociated, plated as replicas, and aliquots were cryopreserved for future murine studies. Replated colonies were tested for their proliferative and differentiative response to GM-CSF (months 3 – 9 in SOW).

Fig. 3. Transfection of human MDS cells with lentivirus cDNA expression library. MDS bone marrow cells from 5q- (pictured at right), mono 7 / 7q-, trisomy 8, and del 20q were transfected at an moi of 0.1 with the lentivirus library described above. After 14 days growth in soft agar surviving colonies were harvested, dissociated, replated as replicates, and aliquots were cryopreserved. Cells transfected with empty lentivirus particles did not generate proliferating colonies. 200x

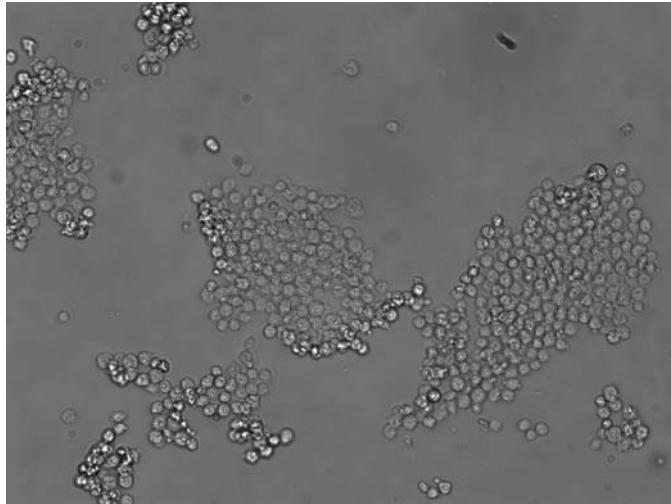


Fig. 4. Detection of lentivirus-encoded GFP in transfected human MDS cells. cDNA inserts encode GFP fusion proteins. Fluorescence microscopy demonstrated strong expression of GFP in puromycin-resistant surviving colonies. 200x

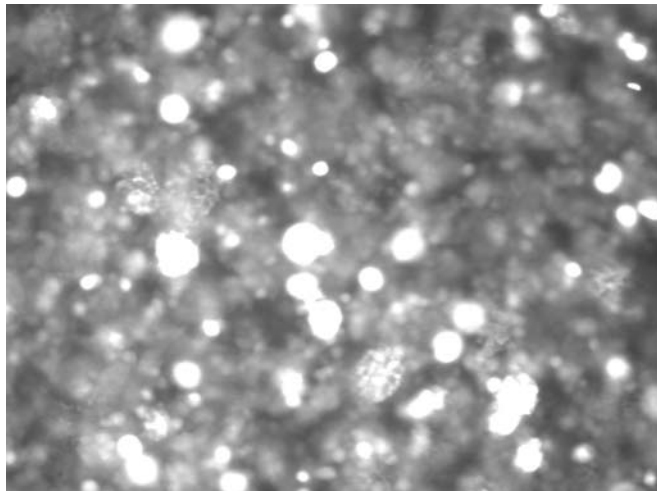
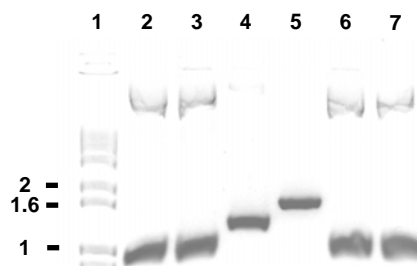
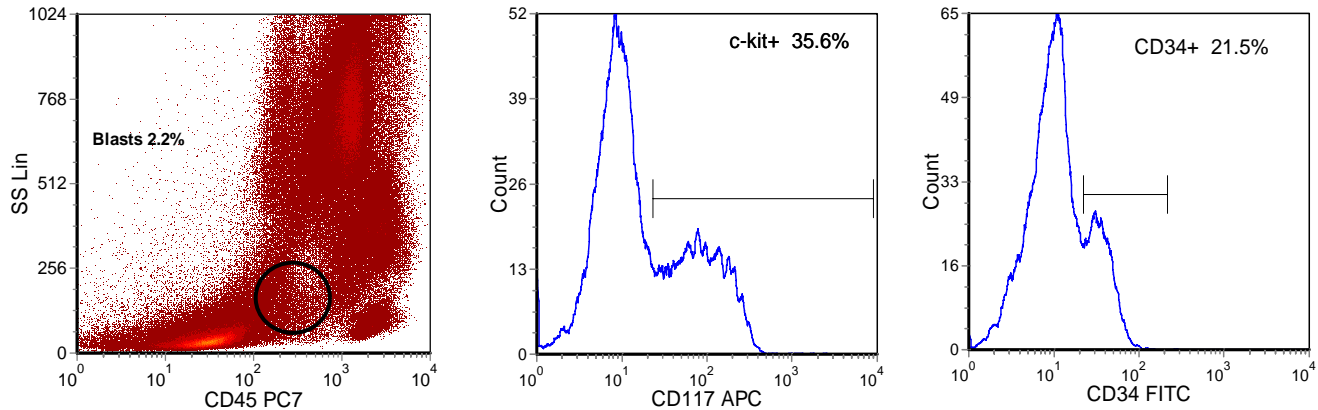


Fig. 5. Expression of lentivirus-encoded cDNA-GFP fusion proteins in transfected human MDS cells. Seven GFP-positive colonies were isolated and screened by PCR using LTR-specific primers to demonstrate that fluorescent MDS cells also retained expression of the encoded library-derived cDNA.



The next objective was to characterize surface markers and phenotype the successful transfectants (months 6 – 12 in SOW). Normal bone marrow cells have a low percentage of blasts (~2-3%), represented by gated population (Fig. 6, black circle). This gated population has low expression of c-kit and CD34 in normal marrow. MDS marrow with elevated blasts (lower panels) have high expression of c-kit and CD34. We are still in the process of evaluating c-kit and CD34 in our collection of lentivirus transfected MDS isolates.

Normal Bone Marrow



MDS with blasts Bone Marrow

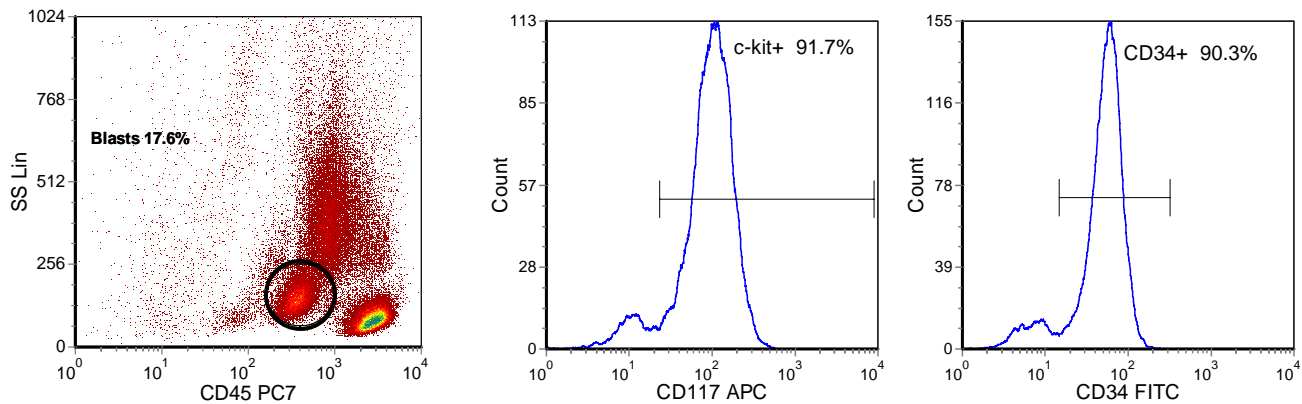


Fig. 6. Characterization of MDS surface markers. Normal human bone marrow (upper panels), and 7q- MDS marrow (lower panels) was stained for CD45 (leukocyte common antigen), CD34 (stem cell marker), and CD117 (c-kit).

We have not yet inoculated NOD.Cg-*Prkdcscid Il2rgtm1Wjl/SzJ* mice (NSG mice) (1-8) with successful transfectants expressing candidate gene. The last objective is to test ability of transfectants to engraft NSG mice and generate chimeric bone marrow (months 12 – 18). This objective will be the most difficult. There is possibility that NSG mice will not engraft well with transfected human MDS marrow. However, the recent development of NSG-SGM3 mice (Jackson Laboratories), in which NSG mice have been engineered to express human stem cell factor, GM-CSF, and IL-3, may provide additional trophic benefit for growth of human xenografted marrow (9). We have recently placed an order for these mice, and they should be arriving shortly.

Key Research Accomplishments

1. Creation of cDNA lentivirus libraries
2. Transfection of human MDS marrow
3. Expression of cDNA-GFP fusion proteins in MDS cells
4. Identification of cDNAs that drive proliferation in MDS cells
5. Characterization of markers associated with MDS blasts

Reportable Outcomes

This data was reported at the 2011 Case Comprehensive Cancer Center Retreat, Corporate College East, July 8, 2011.

Conclusion

We expect to identify several genes that when overexpressed, confer proliferative capability to MDS isolates. Some of these may be known cellular oncogenes; some may be genes that have not previously been known to promote growth; some may function to drive cells toward the AML phenotype. Identification of novel proliferative genes might shed light on new mechanisms of cell growth control and oncogenesis, and might be of therapeutic value if gene expression could be inhibited by an shRNA method in vivo. We expect to identify a number of marrow-expressed cDNAs that may overcome minimal defects that are present in some MDS clones and confer a phenotype in which transfected MDS clones exhibit gain of function and regain the ability to differentiate into functional myeloid cells and support successful engraftment of NSG mice. Identification of cDNAs that can successfully complement the MDS phenotype can be potentially investigated in future human gene therapy trials. Finally, we expect to isolate a smaller number of novel cDNAs, that are not normally expressed in the myeloid lineage, that will confer a normal differentiation phenotype through activation of alternate pathways that are not normally utilized in myeloid cells. Due to the unbiased, completely random nature of this complementation technique, and the underlying abnormal biochemical pathways at work in the MDS clones, it is unlikely that complementation will correct a majority of MDS defects and allow normal differentiation to proceed. However, even if only a handful of MDS phenotypes can be reversed out of a sample size of 300, it would permit greater understanding of the pathophysiology of the disease, and generate leads as to new potential therapies.

References

1. Agliano, A., I. Martin-Padura, P. Mancuso, P. Marighetti, C. Rabascio, G. Pruneri, L. D. Shultz, and F. Bertolini. 2008. Human acute leukemia cells injected in NOD/LtSz-scid/IL-2Rgamma null mice generate a faster and more efficient disease compared to other NOD/scid-related strains. *Int J Cancer* 123:2222-7.
2. Ishikawa, F., S. Yoshida, Y. Saito, A. Hijikata, H. Kitamura, S. Tanaka, R. Nakamura, T. Tanaka, H. Tomiyama, N. Saito, M. Fukata, T. Miyamoto, B. Lyons, K. Ohshima, N. Uchida, S. Taniguchi, O. Ohara, K. Akashi, M. Harada, and L. D. Shultz. 2007. Chemotherapy-resistant human AML stem cells home to and engraft within the bone-marrow endosteal region. *Nat Biotechnol* 25:1315-21.
3. Ito, M., H. Hiramatsu, K. Kobayashi, K. Suzue, M. Kawahata, K. Hioki, Y. Ueyama, Y. Koyanagi, K. Sugamura, K. Tsuji, T. Heike, and T. Nakahata. 2002. NOD/SCID/gamma(c)(null) mouse: an excellent recipient mouse model for engraftment of human cells. *Blood* 100:3175-82.
4. King, M., T. Pearson, L. D. Shultz, J. Leif, R. Bottino, M. Trucco, M. A. Atkinson, C. Wasserfall, K. C. Herold, R. T. Woodland, M. R. Schmidt, B. A. Woda, M. J. Thompson, A. A. Rossini, and D. L. Greiner. 2008. A new Hu-PBL model for the study of human islet alloreactivity based on NOD-scid mice bearing a targeted mutation in the IL-2 receptor gamma chain gene. *Clin Immunol* 126:303-14.
5. Majeti, R., C. Y. Park, and I. L. Weissman. 2007. Identification of a hierarchy of multipotent hematopoietic progenitors in human cord blood. *Cell Stem Cell* 1:635-45.
6. Shultz, L. D., F. Ishikawa, and D. L. Greiner. 2007. Humanized mice in translational biomedical research. *Nat Rev Immunol* 7:118-30.
7. Shultz, L. D., B. L. Lyons, L. M. Burzenski, B. Gott, X. Chen, S. Chaleff, M. Kotb, S. D. Gillies, M. King, J. Mangada, D. L. Greiner, and R. Handgretinger. 2005. Human lymphoid and myeloid cell development in NOD/LtSz-scid IL2R gamma null mice engrafted with mobilized human hemopoietic stem cells. *J Immunol* 174:6477-89.
8. Simpson-Abelson, M. R., G. F. Sonnenberg, H. Takita, S. J. Yokota, T. F. Conway, Jr., R. J. Kelleher, Jr., L. D. Shultz, M. Barcos, and R. B. Bankert. 2008. Long-term engraftment and expansion of tumor-derived memory T cells following the implantation of non-disrupted pieces of human lung tumor into NOD-scid IL2Rgamma(null) mice. *J Immunol* 180:7009-18.
9. Wunderlich, M., F. S. Chou, K. A. Link, B. Mizukawa, R. L. Perry, M. Carroll, and J. C. Mulloy. 2011. AML xenograft efficiency is significantly improved in NOD/SCID-IL2RG mice constitutively expressing human SCF, GM-CSF and IL-3. *Leukemia* 24:1785-8.